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PROPROPOER

COVER LETTER

TO:

TO:	Registration Division of C	Section orporations		
SUBJE	4-EVER	GONE, LLC		
., 4.,		Name of Li	mited Liability Company	
The enc	losed Articles o	of Amendment and fee(s) are su	bmitted for filing.	
		oundence concerning this matte		
		DARREN FROST	-	
		4-EVERGONE, LLC	Name of Person	
		3920 E. LAKE ESTATES	Firm/Company DRIVE	
		DAVIE, FL. 33328	Address	
		DARREN@GRCSERVICES	City/State and Zip Code S.COM	
			to be used for future annual report not	ification)
For furth	er information o	concerning this matter, please c	all:	
BARRY	E. WITLIN		954 473-4500	
	Name o	of Person		ne Telephone Number
Enclosed	is a check for the	he following amount:		
S 25.0	00 Filing Fec	☐ \$30.00 Filing Fec & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registra Division P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce	on ations

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

nited Liability Comp (A Florida Limited	nany as it now appears on our records.) Liability Company)					
Liability Company	y were filed on 01/04/2017	and assigned				
 .						
llowing:						
of the limited lial	pility company here:					
words "Limited Liab	ility Company," the designation "LLC" or th	ne abbreviation "L.L.C."				
Enter new principal offices address, if applicable:						
(Principal office address MUST BE A STREET ADDRESS)		DAVIE, FL. 33328				
		70				
	3920 E. LAKE ESTATES DRIVE	TRATIL TIPL 6				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		<u> </u>				
or registered of	ffice address on our records, ent	The B				
mice auuress nere	<u>e</u> :	73				
DARREN FRO	OST					
3920 E. LAKE	ESTATES DRIVE					
	Enter Florida street address					
DAVIE		33328				
	Liability Company Illowing: of the limited liab cable: ET ADDRESS) /Or registered of ffice address here DARREN FROM 1920 E. LAKE	words "Limited Liability Company," the designation "LLC" or the cable: 3920 E. LAKE ESTATES DRIVE DAVIE, FL. 33328 3920 E. LAKE ESTATES DRIVE DAVIE, FL. 33328 //or registered office address on our records, enterprise address here: DARREN FROST 3920 E. LAKE ESTATES DRIVE Enter Florida street address				

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with to provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being or removed from our records:	added
MGR = Manager AMBR = Authorized Member	

<u>Title</u>	Name	Address	Type of Action
MGR	DARRÉN FROST	3920 E. LAKE ESTATES DRIVE	
		DAVIE, FL. 33328	
			Remove
AM8R	CHRISTINE FROST	3920 E. LAKE ESTATES DRIVE	
MAIDI			
		DAVIE, LF. 33328	
			□ Remove
			Change
MGR	KHARY ROBINSON	3326 BALTIC DRIVE	
		NAPLES, FL. 34119	
			SA Change
			Remove
			Change
			Remove
			Change
			□ Remove
			□ Change

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fective date, if other than to the effective date is listed, the date in the late. If the date inserted in this cument's effective date on the record specifies a delay the 90th day after the record.	nust be specific and cannot block does not meet the Department of State's red effective date.	nt be prior to de ne applicable records,	statutory filing	ore than 90 days a g requirements,	this date will n	ot be listed	d as
ted	201	19					
							
()							
	Signature of a manual		· · · · · · · · · · · · · · · · · · ·				
Darren Frost	Signature of a member	r or authorized	representative	of a member			

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Filing Fee: \$25.00